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2018 SEP 29 AM 9: 19

STATEMENT OF FEC ORGANIZATION FORM 1

| | (| See instructions) | Offic | ca use only | |
|--|-----------|--------------------------|--|-------------|---------------------------------|
| 1. NAME OF COMMITTEE (in f | ull) (Che | ck if name E anged) o | xample: If typying, type ver the lines | 12FE4M5 | |
| The National Republican Trust PAC | | | | | |
| ADDRESS (number and street) 2100 M Street, NW, Suite 170-340 | | | | | |
| (Check if addre | washingt | ton | | | 20037 1233 |
| | | CITY | • | STATE | ZIP CODE 📥 |
| COMMITTEE'S E-MAI | | | | | |
| | | | | | |
| COMMITTEE'S WEB PAGE ADDRESS (URL) | | | | | |
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| COMMITTEE'S FAX NUMBER | | | | | |
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| 2. DATE M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | | | | | |
| 3. FEC IDENTIFICATION NUMBER | | | | | |
| 4. IS THIS STATEMENT X NEW (N) OR AMENDED (A) | | | | | |
| I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete | | | | | |
| Type or Print Name of Treasurer Signature of Treasurer Date Date | | | | | |
| NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. S437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS | | | | | |
| Office Use Only FE3AN042.PDF | | | For further Information Federal Election Commis Toll Free 800-424-9530 Local 202-694-1100 | | FEC FORM 1 (Revised 12/2007) |